

United States Of America
Department of Transportation - Federal Aviation Administration

Supplemental Type Certificate

Number SA2-249

This Certificate issued to Signature Flight Support Corporation,
a Delaware Corporation
7511 Lemmon Avenue, Hangar C
Dallas, TX 75209

certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 4a of the Civil Air Regulations.

Original Product Type Certificate Number : 723

Make : Lockheed

Model : 18

Description of Type Design Change:

Alter cabin windows on R.H. side of fuselage as shown on EAS Dwg. No. 342539, Sheets 1 through 11 Change "A" dated 4/2/57, or Change "B" dated 1/19/59 Sheets 1 through 7, or later FAA approved revision.

Limitations and Conditions:

Compatibility of this modification with other previously approved modifications installed equipment must be determined by installer.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.

Date of application : April 10, 1957

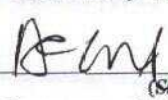
Date reissued : 6/15/92; 12/21/98; 8/31/00

Date of issuance : August 09, 1957

Date amended : June 30, 1982 Rev. 3



By direction of the Administrator

for  (Signature)

S. Frances Cox
Manager, Special Certification Office,
Southwest Region

(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number _____

to *(Name of transferee)* _____

(Address of transferee) _____
(Number and street)

(City, State, and ZIP code)

from *(Name of grantor)* *(Print or type)* _____

(Address of grantor) _____
(Number and street)

(City, State, and ZIP code)

Extent of Authority (if licensing agreement): _____

Date of Transfer: _____

Signature of grantor *(In ink)*: _____